Please type a plus sign (+) inside this box	

PTO/SBr01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERC
Under the Pacenyork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control numb

Under the Paperwor	k Reduction Act of 1995, no perso	ons are required t	o respond to a collec	ction of information u	nless it contains a valid	OMB control number.
DECLARATION AND POWER OF ATTORNEY		Attorney Do	cket Number	J&J-2045		
			First Named Inventor Carvalho et al.			
	ITY OR DESIGN		COMPLETE IF KNOWN			
PATENT APPLICATION (37 CFR 1.63) ☑ Declaration Submitted with ☐ Declaration Submitted after Initial Filling OR Initial Filling (Surcharge	Application I	Number				
		Filing Date		November 1, 2	001	
,	(37 CFR 1.16(e)	37 CFR 1.16(e)) required)	Group Art U	nit		
			Examiner Na	ame		
As a below named inventor	r, I hereby declare tha	t:				
My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
SANITARY ABSORBENT ARTICLE (Title of the Invention)						
the specification of which						
is attached hereto						
OR .						
was filed on (\MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (\MM/DD/YYYY)						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country		Filing Date D/YYYY)	Priority Not Claims		fied Copy tached? NO
D16100490-1	Brazil	03/1:	2/2001			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						
L Additional foreign applic	Jauvii Hullidels ale iiste	เนษและแบบ	emenia phon	ıy uala sneel F	TOTODIUZO ATTA	uteu nereto:

DECLARATION - Utility or Design Patent Application						
I hereby claim the henefit under 35 U.S.C.	C. 119(e) of any United States provisional a	nnlication(s) listed below				
Application Number(s)	Filing Date (MM//DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.				
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.						
Application Serial No.	Filing Date	Status				
		Patented Patented Patented				
Nereby appoint: Place Customer Practitioners at Customer Number 000027777						
☐ Practitioner(s) named below: Name Registration Number						
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.						
Address all telephone calls to at telephon	e number (732) 524					
Customer Number Direct all correspondence to: ☑ or Bar Code Label 000027777 OR □ Correspondence address below						
Name:						
Address:						
Address:						
City:	State: ZIP					
Country	Telephone:	Fax:				

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are purishable by fine or imprisorment, or both, under 18 U.S.C. 1001 and that such willful false statements may leopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:	IE OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor					
Given Name Fan			Family Name or Surname CARVALHO			
Inventor's Signature			Date			
Residence: CityTaubate, SP	State Brazil	Co	untry Brazil	Citizenship Brazil		
Mailing Address Rua Carolina Naresse 63						
City Taubate, SP	State Brazil	ZIF		Country Brazil		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SECOND INVENTOR:						
Given Name Family (first and middle [if any]) Marcia Helena Teixeira or Surr						
Inventor's Signature			. Date			
Residence: City Sao Jose dos Campos, SP	State Brazil	Co	untry Brazil	Citizenship Brazil		
Mailing Address Rua Angelo Rodrigues Alv						
City Sao Jose Dos Campos, SF	P State Brazil	ZII		Country Brazil		
Thereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF THIRD INVENTOR:		petition has bee	n filed for this unsig	ned inventor		
Given Name (first and middle [if anv]) Flavia Guimaraes or Surname GUARAGNA						
Inventor's Signature			Date			
Residence: CityPindamonhangaba, SP	State Brazil	Co	ountry Brazil	Citizenship Brazil		
Mailing Address Rua Justiniano Antunes 25						
City Pindamonhagaba, SP	State Brazil	ZI		Country Brazil		